# PD8000041057

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



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M/w thank



NR 3-17-11



#### FLORIDA DEPARTMENT OF STATE **Division of Corporations**

March 9, 2011

MT GONZALEZ ACCOUNTING SERVICES PA 5651 SW 32ND TERRACE FT LAUDERDALE, FL 33312

SUBJECT: MT GONZALEZ ACCOUNTING SERVICES PA

Ref. Number: P08000041057

We have received your document for MT GONZALEZ ACCOUNTING SERVICES PA and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

1996年中期199日 1996年,1996年

Articles of Revocation of Dissolution cannot be filed for an active Florida corporation. If you are trying to voluntarily dissolve the corporation enclosed is information on filing Articles of Dissolution.

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6892.

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Tina Roberts Regulatory Specialist II

Letter Number: 211A00005748

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Division of Corporations - PO ROX 6327 - Tallahassee Florida 32314

### **COVER LETTER**

TO: Amendment Section Division of Corporations
SUBJECT: CorporATE Dissolution
DOCUMENT NUMBER: PO 8000041057
The enclosed Articles of Dissolution and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
MARIA T GONTALEZ  (Name of Contact Person)
M Conzelez Accounting Services P.P.
_ 5651 SW 32 NO JENTAGE
(Address)
Fort Lauderdale Pc 333/2
(City/State and Zip Code)
For further information concerning this matter, please call:
Mario T Gorzelo 2 at (984) 547-4670  (Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$35 Filing Fee \$\bigs\\$43.75 Filing Fee & \$\bigs\\$43.75 Filing Fee & \$\bigs\\$52.50 Filing Fee, Certificate of Status & Certificate of Status & Certified Copy (Additional copy is enclosed) (Additional copy is enclosed)
MAILING ADDRESS:STREET ADDRESS:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle

Tallahassee, FL 32301

# ARTICLES OF DISSOLUTION

FILED 11 MAR 17 PM 12: 35

Pursuant to section 607.1401, Florida Statutes, this Florida profit corporation submits in Florida Statutes articles of dissolution:

FIRST:	The name of the corporation as currently filed with the Florida Department of State:
	MI GONZUEZ ACCOUNTING SerVICES PA
SECOND:	The document number of the corporation (if known): PO80000 41057
THIRD:	The file date of the articles of incorporation: $4/23/69$
FOURTH:	(CHECK AT LEAST ONE BOX)
	None of the corporation's shares have been issued.
	The corporation has not commenced business.
FIFTH:	No debt of the corporation remains unpaid.
SIXTH:	The net assets of the corporation remaining after winding up have been distributed to the shareholders, if shares were issued.
SEVENTH:	Adoption of Dissolution (CHECK ONE)
	A majority of the incorporators authorized the dissolution.
	A majority of the directors authorized the dissolution.
Signa	(By addirector, president of other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.)
	Many T Conzelez  (Typed or printed name of person signing)
	President
	(Title of Percon Signing)

Filing Fee: \$35

# Notice of Corporate Dissolution

This notice is submitted by the dissolved corporation named below for resolution of payment of unknown claims against this corporation as provided in s. 607.1407, F.S.

This "Notice of Corporate Dissolution" is optional and is not required when filing a voluntary dissolution.
Name of Corporation: MT Gonzalez Accounting Services PA
Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the Articles of Dissolution.
Description of information that must be included in a claim:
None Appliable
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations) $\frac{E(-E(-S(u)) - 22 - vn}{2} = \frac{22 - vn}{2$
5651 SW 32 ND Derrace Ft Lauderdale Ft. 83312
A claim against the above named corporation will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.
MARIA T Garzelez Printed Name of the Person Filing Signature of the Person Filing